ADVERSE SURVEY ACTIONS – HEALTH FACILITIES DECEMBER 2002 SOUTHERN REGION

| Name | Owner | Administrat or | Action Taken | Rationale for Action | Next Step |
|---------------------------------------|----------------------------------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Oakview Living Center, L.L.C. | Patricia Johnson Bruce Johnson Craig Johnson | Paula Miles | Conditional License issued 6/13/02 PCRA found in full compliance as of 7/12/02 & notified via e-mail on 7/29/02. Letter will be sent removing ban on admissions; conditional license to remain. | PCRA immediate jeopardy and substandard quality of care on 6/8/02 | Conditional License issued with the following Conditions: 1. Submit an acceptable plan of correction to PCRA 2. Comply with all PCRA imposed sanctions including ban on admissions 3. Increased monitoring. Letter will be sent removing ban on admissions; conditional license to remain. |
| St. George Care and Rehabilitation | Kindred Nursing Centers West, LLC | Tony Wrigley | Conditional License Issued 8/13/02 Revised Conditional License 8/14/02 | PCRA immediate jeopardy and substandard quality of care on 8/8/02 Complaint Survey & Annual Survey. Immediate Jeopardy removed 8/11/02 | Revised Conditional Licensed issued with the following Conditions: 1. Submit acceptable POC to PRCA & correct all deficiencies. 2. Comply with PCRA sanctions 3. Increased monitoring & associated costs 4. Admissions allowed for contracted providers, all others require prior approval from BOL |
| Hales Rest Home | | Steve Bona | Conditional License Issued 9/11/02 Bureau Conference 9/27/02 with Amended Conditional License letter that stated when Mr. Bona submits verification of ethics class – conditional license will be | DOPL found he knowingly hired an LPN who was not licensed | Conditional License issued with the following Conditions: 1. Hire qualified nurse within 14 days (done) 2. Increased monitoring to ensure compliance 3. Mr. Bona to comply with stipulations placed on him by |

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|---------------------------------------|---------------------|--------------------------------|--------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | removed. | | DOPL |
| Canyon View Country Home (AL-I) | Sherree Reynolds | Sherree Reynolds, Admin. | Conditional License 10/23/02 to 1/30/03 | Actual harm to resident Repeat Deficience | Conditional License issued with the following Conditions: 1. POC by 11/04/02 2. Correct all deficiencies by 11/18/02 3. No new admissions 4. Licensee present 2 hours per day 5. Increased monitoring 6. CMP of \$1500.00 by 11/29/02 |